CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

Vote-by-Mail Ballot Application: June 5, 2018, Election

Only registered voters in San Francisco can apply for a vote-by-mail ballot using this form. If you are a military or overseas voter, apply for a ballot using the Federal Post Card application on *FVAP.gov*.

The Department of Elections must **receive** this completed application **by 5 p.m. on Tuesday, May 29**. Hand deliver, mail, or fax the completed and signed application to the address or fax number listed below. You may also email it as a scanned attachment to SFVote@sfgov.org.

Select One: I want to receive a ballot by mail for the June 5, 2018, Election ONLY I want to become a permanent vote-by-mail voter and receive a ballot by mail for each election

2. Print Your Information:

Fill out the following information completely and accurately. If you have moved within San Francisco or changed your mailing address since you registered to vote, the Department will update your registration record according to the information provided below.

Last Name	First Name	M.I.	Birth Date: MM / DD / YYYY
			San Francisco, CA
San Francisco Residential Address whether the second secon	nere you currently live; cannot be a PO Box, mai	il drop, or business	ZIP Code

Mailing Address where you want your ballot and other correspondence from the Department to be mailed; if you leave this field blank, your ballot will be sent to your residential address

Check here if applicable:
The mailing address listed above is for the June 5, 2018 Election ONLY

Optional:

I want to receive my ballot and other election materials in the following language, in addition to English:				
Chinese (中文) 口 Spanish (Español) 口 Filipino				
I want to receive a reference copy of my ballot in:				
□ Vietnamese (Việt ngữ) □ Korean (한국어) I prefer to receive my reference copy in Korean or Vietnamese by: □ Mail □ Email:				

3. Read and Sign Below:

I have not applied for a vote-by-mail ballot from any other jurisdiction for this election. I certify under penalty of perjury under the laws of the State of California that the information I have provided on this application is true and correct. Warning: Perjury is a felony, punishable by imprisonment in state prison for up to four years. (Penal Code § 126)



Date _

If you are unable to sign, make a mark or an "X" and have a witness over the age of 18 sign next to your mark.

A new service for voters with disabilities is now available! For information about the

 accessible vote-by-mail system and other accessible voting services, visit the "Accessible Voting" page on *sfelections.org.* CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

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郵寄投票申請表:2018年6月5日選舉

只有三藩市的登記選民可以使用此表格申請郵寄投票的選票。如您是軍人或海外選民,請使用聯邦投票協助計劃 FVAP.gov 提供的聯邦明信片申請表,申請您的郵寄選票。

選務處必須於 5月29日,星期二,下午5時前收到完整填妥的申請表。您可以把已填妥及簽署的申請表親自送交、 郵寄或傳真到表格下方所示的地址或傳真號碼。您也可以把申請表的掃描檔案以附件方式電郵至選務處 SFVote@sfgov.org。

1. 選擇一項:

□ 我希望在 2018 年 6 月 5 日選舉僅此一次收到郵寄選票

□ 我希望成為永久郵寄投票選民,並且於每次的選舉透過郵寄方式收取選票

2. 填寫您的資料:

請完整和準確地填寫以下各項的資料。如您在登記投票後,在三藩市境內搬遷或更改您的郵寄地址,選務處將會根據 以下所提供的資料,更新您的選民登記記錄。

姓	名	中間名	出生日期: 月/日/年
			San Francisco, CA
三藩市住宅	: 地址 ,您目前在此地址居住;不接受郵政信箱	首、郵件投遞箱、或商業地 址	郵政編號
郵寄地址,	您需要選務處把您的選票和其他通訊寄往此地	也址;如您把這一項留空,您的	的選票將會寄往您的住宅地址
如適用,請	勾選方格: 以上所列的郵寄地址 只適用	於 2018年6月5日選舉	
自選:			
	,我希望收到用以下語言印製的 選票 和 其他的		
口中文	□ 西班牙文 (Español) □ 菲	律賓文 (Filipino)	
	一份用以下語言印製的 選票參考譯本 :		
□ 越南文 (
我希望用以	下方式收取我的越南文或韓文選票參考譯本:	□ 郵寄 □ 電郵:	
3. 閱讀並	在下方簽署 :		
	選舉沒有申請其他任何司法管轄區的郵寄選票		
	'報的各項資料全屬真確無訛。警告:偽證罪是 》第 126 條)	<u></u> 一項重罪,可判處在州監獄監	禁,最高刑期為四年。
(《川云央			
在此簽	著 🗕 🔶		日期
	如您沒有能力在申請表上簽署,請畫調		此舉必須要由一位 18 歲
	以上人士見證,並且在您的記號旁邊後		
	▲殘障選民提供的一項新服務,現已 → → → → → → → → → → → → → → → → → → →		系統和其他的無障礙投票服
	務,詳情請瀏覽 sfelections.org的「投票	《便利礼服務」專員。	
- ·	,	tions.org	中文 (415) 554-4367
Fax (415) 5 TTY (415) 5		. Goodlett Place In Francisco, CA 94102	Español (415) 554-4366 Filipino (415) 554-4310